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failing Ad	idress (include o	city and zip code)	·			Telephone No.	
-Mail Add	4/1064/	yaho. lo	7				
elect Ap	propriate Box(es) (2) CANDIDAT	E PAC	BAG POLPI	RTY IND EXP		ANNUAL FILING
X)	Report #1	— Due Marcl		an. 1, 2005 — Mar. 2	4, 2005		CHAN 2
\Box	Report #2	— Due May 3		ar. 25, 2005 — May	26, 2005	-	u CCC
	Report #3	Due — July 1		ay 27, 2005 — June	30, 2005	For Office U	SE Only
			•		>		U
	CON	TRIBUTIONS	SUMMAR			This Period	Cumulative From Beginnir of Report Perio #1 through En of This Reporting Period
, 1.	Total Moneta	ary Contributions F	Received in Exc	cess of \$100 🐃		4	getin beginning to the second
2.	Total Moneta	ary Contributions F	Received of \$10	00 or Less		10	
				This Period	Cumulative From		and the same
				100	Beginning of Report Period # Through End of This Reporting		and the second second
	Received		ontributions		Penous	- I.	
	(Add Lines 1 Total Value of Excess of \$	of In Kind Contribu	tions Received	l in		1	
				EXPENSES S	UMMARY		
5.	Total Moneta	ary Expenses Paid	in Excess of \$	100		Ø	
	Total Amour	ry Expenses Paid at of All Monetary				100-	
8.	(Add Lines 5 Total Value o of \$100	and 6) f In Kind Expense	s in Excess	- 0			
· :		Declare Under P	enalty of Peri	AFFIRMA upy That the Fore	TION egoing is True and	d Correct.	
		·			1/25/05		

Name (print) Office (if applicable) District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
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Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	Α
Expenses related to volunteers	В
Expenses related to travel	C §
Expenses related to advertising	D 24
Expenses related to paid staff	τ Ε
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	. Н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT! OF EACH/EXPENSE
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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

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Name (print)	,	Office (if applicable)		 District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
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District (if applicable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
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Prescribed by Secretary of State
NRS 294A.120, 294A.125,
294A.140, 294A.150, 294A.160
294A.200, 294A.210, 294A.220, 294A.362

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